

Meeting Summary & Action Items

Maine Telehealth and Tele-Monitoring Quarterly Advisory Group Meeting

Date: Thursday, August 31, 2023 10:30AM-12:00PM

Attendees: Lisa Harvey-McPherson, Tracy Jalbuena, Sue Woods, Erin Nadeau, Erica James, Lisa Letourneau, Laura Mrazik, Jen Peers, Carol Carew, Andrea Gimpel-Blanchard, Mara Larkin, Lisa Nolan, Danielle Louder, Andrew Solomon, Caren Bishop, Chris Gilding, Reid Plimpton

Issue	Summary/Decisions	Action Items and/or Resources	Lead
Welcome & Agenda Scan	Danielle opened meeting and did agenda scan with the group to ensure all key items were covered. Introductions were made.	N/A	FYI
TH/TM Priority Areas	<p>Promote Payment/Policy Change</p> <p>Key updates from Maine’s 131st legislative session – Lisa H-M</p> <ul style="list-style-type: none"> Primary telehealth bill was LD 757, resolve to review telemonitoring and telehealth services to Mainecare. 2 bills, one for telemonitoring services and the other for remote ultrasound procedures. Northern Light Health testified in support of both bills. The telemonitoring bill opens up telemonitoring as an independent benefit that any willing provider could provide. Need to make sure it is tied to either PCP or specialist such as cardiologist to support rapid response. The other bill, need to make sure the OBGYN is certified. DL shared that the bill allowing Maine to enter the physical therapy compact passed as well. <p>DEA Proposed Rules</p> <ul style="list-style-type: none"> DEA Practice of Telemedicine: Listening Sessions (9/12 and 9/13) <ul style="list-style-type: none"> DL - not accepting any more in person participants, but you can register for the live stream sessions - over 48000 public comments on DEA proposed changes Update: DEA has postponed making a final decision on its proposed rules and expanded pandemic waivers for an additional six months to November 11, 2023 	<p>Resources and Action Items</p> <ul style="list-style-type: none"> CMS Post-COVID 19 Policies: At-a-Glance Chart – CCHP Telehealth Policy Activity in the 131st Legislature <ul style="list-style-type: none"> LD 1249 (Ought Not to Pass – 6/21/23); LDL 757 (Resolve 7/27/23); LD 1749 (Enacted 6/26/23); LD 1494 (Not Yet Determined) MaineCare Notice of Agency Rule-making Proposal, MaineCare Benefits Manual Chapter I, Section 4, Telehealth Services (June 14, 2023) <p>DEA related Articles/Resources:</p> <p>DEA Practice of Telemedicine: Listening Sessions (9/12 and 9/13)</p> <p>Providers Make Impassioned Plea for Virtual Prescribing Flexibilities</p>	FYI

	<p>HIPAA Extension – 90 day grace period expired 8/9/23 https://public-inspection.federalregister.gov/2023-07824.pdf?utm_source=federalregister.gov&utm_medium=email&utm_campaign=pi+subscription+mailing+list</p> <p>Behavioral Health Digital Therapeutics</p> <ul style="list-style-type: none"> • Digital Health Resource Guide - CB - Some of the latest additions have been to the digital therapeutics section based on resources shared recently by Lisa, and more specifically prescription digital therapeutics. Also doing research on which states Medicaid are paying for FDA cleared prescription digital therapeutics. Continuing to dig into this a bit more and will have a more solid draft to share for feedback in the coming weeks. • LML - shared info on a learning session she recently attended - could be covered under DME category coverage of Medicaid plans. Don't know if any commercials are covering them yet. If it's going to go into state Medicaid agency its most likely to go in front of pharmacy and therapeutic agencies • Sue Woods - Attended first DTx Alliance Summit earlier this summer. Supported a bill - https://www.congress.gov/bill/118th-congress/senate-bill/723 Some people think that these don't need to be prescribed, rather could be provided OTC b/c of low risk. • Chairman of DTx Alliance is exec at a company here in Maine, MEDrythms - could get him to talk about DTx. CB to invite him to come to the working group and reach out to get next meeting scheduled. • LML - prescription is critical if you want payers to pay for it. Hope it would be both OTC and prescription. • Tracy Jalbuena - At MH, lots of telehealth tools being funneled through MyChart. When it comes to peds, there's the issue of access, guardianship etc. challenges in trying to make that function. 	<p>CCHP's 9/26 newsletter, highlighting learnings from the DEA listening sessions on 9/12 and 13</p> <p>DRAFT Guide updated version available for review/feedback; Caren will share further updates at next Advisory Mtg</p>	<p>Caren</p> <p>FYI</p>
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	<p>New resources and opportunities</p> <p>Maine PNMI (Private Non-Medical Institutions) Project Overview</p> <p>Reid - Rounding out year 1 pilot phase of project. 35 facilities, 9 orgs, to increase telehealth access points. Year 2 to launch October 2023, 95 facilities. 4 or 5 different designs for equipment with training and connections to providers.</p> <p>Support Primary Care</p> <p>eConsults:</p> <ul style="list-style-type: none"> • Maine eConsult Network pilot site updates, network services • Andrew - background on eConsult network funding. Data, graphs from ConferMED dashboard. Funding through the end of the year. Looking to get a better understanding of commercial payer reimbursement. • Tracy - MaineHealth has been scaling eConsults. Contracted with AAM for support. Current work through is how to portion RVUs to account for time between PCP and specialist time. • Jen – Northern Light Health’s program is internal, leverage our own specialists. The codes we’re using are time based. Varying codes based on time commitment of PCP and specialist. There is also an RVU associated with each of those codes that they are getting RVUs for. Trying to get a better understanding of what we are actualizing for reimbursement - requested a report to break down by payer what we are receiving - will send report to Caren. • Laura – MaineGeneral is also happy to participate in these conversations. MaineGen doing this work and not billing for it. • Caren will reach out and include in the eConsult reimbursement discussion. We need to all get together and see which commercial payers are paying and how much. 	<p>Recent Articles on Maine eConsult Network efforts: Bridging Health Care: Connecting Primary Care and Specialty Care through Technology</p> <p>Health Leaders Media 9/15: ECONSULTS OFFER A VIRTUAL PLATFORM TO IMPROVE SPECIALIST ACCESS</p> <p>Caren will pull together a meeting/strategic session with interested orgs early Fall</p>	<p>FYI</p> <p>Caren</p>
<p>Evolving with the Telehealth Landscape: Revisiting TH/TM Advisory Focus Areas</p>	<p>Discuss current focus and scope of Workgroups as they pertain to the current landscape and TH/TM Advisory mission; Recommendations for 2024 and beyond</p> <p>DL – Per Maine statute, TH/TM’s charge is to identify challenges and barriers and make recommendations – Do any changes need to be made? Are we on the right path? New focus areas?</p>	<p>Discussion</p> <p>NETRC will synthesize a list, what each group is, what each group is working on, and who is on what group. Send this out to the group for review and feedback.</p>	<p>All</p> <p>NETRC Team</p>

	<p>Current focus areas:</p> <ul style="list-style-type: none"> • Policy • BH • Primary Care • Workforce Models <p>Sue – there is opportunity to think more broadly. Where is the opportunity to share and learn and be on the cutting edge of what is happening but at the same time stay on the charge.</p> <p>Tracy - 2 major challenges at MaineHealth. 1st is broadband access. 2nd challenge is state licensure. State by state variability becomes a hard stop in becoming geographically agnostic. State by state variability 2nd point of advocacy.</p> <p>Danielle shared that Maine is ahead of the curve with respect to broadband planning and expansion – see 5-year Broadband Action Plan and Digital Equity Plan in Resource section</p> <p>Carol - we see the same thing. Becoming an access issue now with workforce issues. Not being able to open up the field to hire people out of state. We're also looking at challenges in dental department - expanding teledentistry would be great. Hiring dentists and hygienists has been hard.</p> <p>Reid - workgroups have broad titles to give flexibility. Most subgroups are meeting when they're charged with something rather than meeting regularly. Workgroup names could stay the same but we need a new roster as membership has changed over time.</p> <p>Sue - Focusing on workforce is critical. Nationally it's a crisis. Figuring out ways to create efficiency using digital health. Training and education might be needed.</p>	<p>Each Advisory member to choose at least one workgroup to participate in based on expertise/interest.</p>	<p>All</p>
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	<p>Innovation, emerging tools, staying on the cutting edge. Roux Inst. there could be some cross collaboration. Do we need more public health collaboration?</p> <p>Erica - Billing for telehealth is concerning b/c our SLP program is an in-hospital outpatient center. Come the end of the calendar year we don't know what's going to happen.</p> <p>Tracy - There is a direct line between adequate reimbursement and mental wellbeing of healthcare staff and the overall functioning of the system. Advocacy for reimbursement is necessary.</p> <p>Carol - CCPM is looking at piloting a program to do specialty consults right in primary care visit with primary care doctors. Blue Cross is doing it.</p> <p>DL - hearing a lot about advocacy and sharing. For us to make recommendations based on success of programs and projects is a great use of our time.</p> <p>Lisa H-M - There are health professions that add value, and are they covered by telehealth or not? Interesting to do a project to look at pharmacists, dieticians, dental etc... here are all of the professions that add value, and here are gaps or not on telehealth coverage policy that we can focus on.</p> <p>Lisa Nolan - if you do an inventory of providers and what's covered, it might be helpful to show self-insured employers – they make up half of the commercial market - they could show some innovations there. If you prioritize based on the list of gaps in coverage, we could query our members. The association of health plans may also be able to coordinate.</p> <p>DL – suggest we come up with a list for folks to review and can let us know if it's a priority?</p>		
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	Lisa L - Priorities. Hearing one new one: innovation. Nothing to take off.		
Resources and Opportunities	<p>Resources and Opportunities (All) DL went over resources, funding etc. Reid shared telehealth readiness test</p> <ul style="list-style-type: none"> • NETRC Telehealth Technology Test for Patients/Consumers and NCTRC Digital Navigation Toolkit • NETRC 2023 Regional Telehealth Conference - Sept. 18-19 in Nashua, NH • Virtual Events: HRSA National Telehealth Conference – Sept. 12; Rural Telementoring Unconference – Oct. 18, 2023 • Policy related resources: Recent CCHP newsletters – State Licensure Landscape: Permanent Post-PHE Out-of-State Telehealth Provider Policies; Dog Days Are Almost Over, But Certain Deadlines Approach for Telehealth • Maine 5-Year Broadband Action Plan submitted to Feds 8/11/23 • Maine Digital Equity Plan – submitted to NTIA 9/8/23 • Forecasted – HRSA-24-010 Evidence-Based Telehealth Network Program 	Tracy – suggested we add smart watches to the device page of BETA site	Reid to update device page per Tracy's recommendation
Next Steps and Adjourn	<p>Danielle reviewed next steps/assignments (see Action Items) and encouraged all to reach out with questions and/or resources to assist with group activities to further promote telehealth.</p> <p>Items of interest for November meeting:</p> <ul style="list-style-type: none"> - Answer any remaining questions/input around strategic discussion and workgroups - Updates on state-wide broadband expansion/digital equity efforts <p>Reminded group of Advisory Group webpage which houses meeting info and relevant resources.</p>	Send out meeting summary and resources discussed; Include items of interest on November agenda	Danielle NETRC team
<p>Next Meeting: Thursday, November 2, 2023 10:30A-12P Zoom: https://us02web.zoom.us/j/87371125847</p>			